



*The Missouri Rural Health Association (MRHA) is a non-profit, grass-roots, member-driven organization whose mission is to safeguard and improve the health of rural Missourians. MRHA accomplishes its mission by engaging in partnerships and providing leadership on rural issues **through advocacy, communication, education, and research***

ICD - 10 CODING

Are you Ready?

Missouri Rural Health Association is working to bring affordable ICD-10 Training to rural Missouri providers. We invite you and your staff to attend On-Line ICD-10. On-Line is the most cost effective way to get updated and ready for ICD-10. Our training has been designed to optimize time and money. Each 2-4 hour session is \$50 but with the connection, you can fill the training room with attendees!

Training sessions offered: Select only the sessions you need.

GO-TO-MEETING ONLINE

Basic Anatomy & Pathophysiology Training for ICD-10 (Part 1 & 2: 4 HRS each)

Advanced Anatomy & Pathophysiology Training for ICD-10 (Part 1 & 2: 4 HRS each)

ICD-10 Code Set & Guidelines (Part 1 2, 3, & 4: 4 HRS each)

- REQUIRED/ORDER DIRECT: ICD-10 CM/PCS Coding Theory & Practice Workbook 2013 version by K.R. Lovaasen & J. Schwerdtfeger ISBN#978-1-4557-4533-3 at Amazon.com for under \$50

Provider Documentation Training (2 HRS)

Who Should Attend?

All staff who document medical records and providers. Use as initial or brush up training.

You do not need to be a MRHA member to sign up for classes. We ask that you share this information with other providers & clinics in order to share this training opportunity.

The Trainers:

Medical Revenue Solution, LLC, staff members Cathy Jennings, LaDonna Johnson, and Amber Condren will be taking attendees through the material. All trainers are highly qualified and experienced in medical coding, the problems, and solutions.

How to Register

Complete Registration page for each SITE that will need a connection code. Only those with paid registration will receive the on-line pass code within 24 hours of the event. Each session is limited to 23 site connections. See registration form for more details. Registration and payments must be received a minimum of 3 days prior to the selected training session(s).

TRAINING PROVIDED BY

Medical Revenue Solutions, LLC

An Independent Healthcare Audit Organization

TRAINERS

Cathy Jennings
LaDonna Johnson
Amber Condren

ICD - 10 Registration



Firm or Organization Name: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Contact: _____ E-Mail _____

Phone: _____ Fax: _____

DATE	CLASS TITLE	SESSION TIME	SESSION TIME	COST
April 7, 2015 Tuesday	Basic Anatomy & Pathophysiology for ICD-10 PART 1	8:00 AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00 PM <input type="checkbox"/> \$50	Total \$ _____
April 21, 2015 Tuesday	Basic Anatomy & Pathophysiology for ICD-10 PART 2	8:00 AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00PM <input type="checkbox"/> \$50	Total \$ _____
DATE	CLASS TITLE	SESSION TIME	SESSION TIME	COST
May 5, 2015 Tuesday	Advanced Anatomy & Pathophysiology for ICD-10 PART 1	8:00 AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00PM <input type="checkbox"/> \$50	Total \$ _____
May 19, 2015 Tuesday	Advanced Anatomy & Pathophysiology for ICD-10 PART 2	8:00 AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00PM <input type="checkbox"/> \$50	Total \$ _____

Required/Order ICD-10 CM/PCS Coding Theory & Practice Workbook, ISBN # 978-1-4557-4533-3
See p.1 for details.

DATE	CLASS TITLE	SESSION TIME	SESSION TIME	COST
June 2, 2015	ICD-10 Code Set & Guidelines PART 1	8:00AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00 PM <input type="checkbox"/> \$50	Total \$ _____
June 23, 2015	ICD-10 Code Set & Guidelines PART 2	8:00AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00 PM <input type="checkbox"/> \$50	Total \$ _____
July 7, 2015	ICD-10 Code Set & Guidelines PART 3	8:00AM-12 Noon <input type="checkbox"/> \$50	1:00-5:00 PM <input type="checkbox"/> \$50	Total \$ _____
July 21, 2015	ICD-10 Code Set & Guidelines PART 4	8:00AM-12 Noon <input type="checkbox"/> \$50	No Class	Total \$ _____

DATE	CLASS TITLE	SESSION TIME	COST
June 16, 2015	ICD-10CD Provider Documentation	2:00-4:00 PM	\$50.00 \$ _____

☐ Check ☐ Credit Card

Total Due \$ _____

Mail Checks to:

MRHA
2412 Hyde Park Road, Suite B
Jefferson City, MO 65109

Credit Card Purchase:

Contact Pam Buschjost
(573) 634-4314 OR (573) 632-2700
pam@cabllc.com